

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.	FILING DATE
APPLICANT(S)	

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		TOTAL IND. 1	TOTAL DEP. 1	TOTAL CLAIMS 1		TOTAL IND. 2	TOTAL DEP. 2	TOTAL CLAIMS 2
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